

CONTINUE for your first travel day. If you have more than 12 places, please record them on a separate piece of paper.

	What is the NAME OF THE PLACE and WHERE is it located?	What TIME did you ARRIVE? Record exact time	HOW did you GET there? Use the LIST 1 CODES
PLACE 7	Your location	am / pm	List ONE code only
PLACE 8	City, State, and Zip: Next PLACE: My Home	am/pm	List ONE code only
PLACE 9	Next PLACE: My Home Bus stop or Train station My Work Other Place My School Provide as much of the address as possible: Place Name/Train Station Name: Street Address/Nearest Cross Streets: City, State, and Zip:	am / pm	List ONE code only
PLACE 10	Next PLACE: My Home Substitution Wy Work Other Place Provide as much of the address as possible: Place Name/Train Station Name: Street Address/Nearest Cross Streets: City, State, and Zip:	am / pm	List ONE code only
PLACE 11	Next PLACE:	: am / pm	List ONE code only
PLACE 12	Next PLACE:	:_ am/pm	List ONE code only

(Questions? See the Instructions & Example or call the toil-free hotline at 877-261-4621)

NUMBER of	IF BY AUTO:		IF BY TRANSIT:		WHAT	What TIME
people traveling with you? Don't include yourself	Which household VEHICLE? Make & Model	ousehold GET OUT EHICLE? of your	Which Was a ROUTE # PERSONAL or LINE? VEHICLE AVAILABLE		did you DO there? Use the LIST 2 CODES	did you LEAVE? Record exact time
Total #: (Don't include yourself) # of Household members w/ you: (Don't include yourself)		□ Yes □ No		□ Yes □ No	List ALL codes that apply	: am/pm
Total #: (Don't include yoursell) # of Household members w/ you: (Doe't include yoursell)		☐ Yes ☐ No		□ Yes □ No	List ALL codes that apply	: am/pm
Total #:(Don't include yourself) # of Household members w/ you: (Don't include yourself)		□ Yes □ No		□ Yes □ No	List ALI. codes that apply	am/pm
Total #: (Don't include yourself) # of Household members w/ you: (Don't include yourself)		□ Yes □ No		☐ Yes ☐ No	List ALL codes that apply	am/pm
Total #:		© Yes □ No		☐ Yes ☐ No	List ALL codes that apply	:: am/pm
Total #: (Don't include yourself) # of Household members w/ you: (Don't include yourself)		□ Yes □ No	Day Tw	□ Yes □ No To begins o	List ALL codes that apply n next pa	am/pm





Record each PLACE you go, starting with your location at 3:00 a.m. on your second travel day and ending with your location at 2:59 a.m. 24 hours later.

	What is the N	What TIME did you ARRIVE? Record exact time	HOW did you GET there? Use the LIST 1 CODES	
PLACE 1	Your location ☐ My Home at 3:00 a.m.: ☐ My Work ☐ My School Place Name/Train Station Name: Street Address/Nearest Cross Streets City, State, and Zip:			X
PLACE 2	Street Address/Nearest Cross Streets	■ Bus stop or Train station ■ Other Place Provide as much of the address as possible:	: am/pm	List ONE code only
PLACE 3	Next PLACE: My Home My Work My School Place Name/Train Station Name:	■ Bus stop or Train station ■ Other Place Provide as much of the address as possible:	am/pm	List ONE code only
PLACE 4		Bus stop or Train station Other Place Provide as much of the address as possible:	: . am/pm	List ONE code only
PLACE 5	Next PLACE: My Home My Work My School Place Name/Train Station Name: Street Address/Nearest Cross Streets City, State, and Zip:	:	÷ am/pm	List ONE code only
PLACE 6	Next PLACE: My Home My Work My School Place Name/Train Station Name: Street Address/Nearest Cross Streets City, State, and Zip	:	- am/pm	List ONE code only

(Questions? See the Instructions & Example or call the toll-free hotline at 877-261-4621)

NUMBER of	IF BY AUTO:		IF BY TRANSIT:		WHAT	What TIME
people traveling with you? Don't include yourself	Which household VEHICLE? Make & Model	Did you GET OUT of your vehicle?	Which ROUTE# or LINE?	Was a PERSONAL VEHICLE AVAILABLE?	did you DO there? Use the LIST 2 CODES	did you LEAVE? Record exact time
X	X		X		List AIL codes that apply	am/pm
Total #: (Don't include yourself) # of Household members w/ you: (Don't include yourself)		□ Yes □ No		⊡ Yes □ No	List ALL codes that apply	:: am/pm
Total #: (Don't include yourself) # of Household members w/ you: (Don't include yourself)		□ Yes □ No		☐ Yes ☐ No	List ALL codes that apply	: am/pm
Total #:		☐ Yes ☐ No		□ Yes □ No	List ALL codes that apply	:_ am/pm
Total #: (Don't include yourself) # of Household members W/ you: (Don't include yourself)		□ Yes □ No		☐ Yes ☐ No	Elst ALL codes that apply	:: am/pm
Total #: (Don't include yourself) # of Household members w/ you: (Don't include yourself)		□ Yes □ No		□ Yes □ No	List ALE codes that apply: Contine	: am/pm





Record each PLACE you go, starting with your location at 3:00 a.m. on your first travel day and ending with your location at 2:59 a.m. 48 hours later.

HOW did What TIME What is the NAME OF THE PLACE did you you GET and WHERE is it focated? ARRIVE? there? Use the Record LIST 1 exact time CODES Your location My Home Bus stop or Train station Other Place at 3:00 a.m.: D My Work Provide as much of the address as possible: ☐ My School Place Name/Train Station Name: Street Address/Nearest Cross Streets: City, State, and Zip: **C** Bus stop or Train station Other Place ☐ My Work Provide as much of the address as possible: □ My School LIST ONE Place Name/Train Station Name: am/pm code only Street Address/Nearest Cross Streets: City, State, and Zip: _ Next PLACE: My Home **€ © Bus stop or Train station** Mv Work Cother Place Provide as much of the address as possible: My School **List ONE** Place Name/Train Station Name: am/pm code only Street Address/Nearest Cross Streets: City, State, and Zip: Next PLACE: 3 My Home Bus stop or Train station My Work Other Place Provide as much of the address as possible: My School List ONE Place Name/Train Station Name: am/pm code only Street Address/Nearest Cross Streets: City, State, and Zip: Next PLACE: ☐ My Home € ☐ Bus stop or Train station Other Place ☐ My Work Provide as much of the address as possible: ■ My School **LIST ONE** Place Name/Train Station Name: am/pm code only Street Address/Nearest Cross Streets: City, State, and Zip: Next PLACE: @ My Home Bus stop or Train station Other Place ☐ My Work Provide as much of the address as possible: My School List ONE code only Place Name/Train Station Name: am/pm Street Address/Nearest Cross Streets: City, State, and Zip:

(Questions? See the Instructions & Example or call the toll-free hotline at 877-261-4621)

NUMBER of	IF BY AUTO:		IF BY TRANSIT:		WHAT	What TIME
people traveling with you? Don't include yourself	Which household VEHICLE? Make & Model	Did you GET OUT of your vehicle?	Which ROUTE# or LINE?	Was a PERSONAL VEHICLE AVAILABLE?	did you DO there? Use the LAST 2 GODES	did you LEAVE? Record exact time
\times	X	X	X	X	List ALL codes that apply	am/pm
Total #: (Don't include yourself) # of Household members w/ your_ (Don't include yourself)		□ Yes □ No		Ci Yes Li No	List ALL codes that apply	am/pm
Total #:		□ Yes □ No		O) Yes O) No	List Al.I. codes that apply	am/pm
Yotal #: (Don't include yourself) # of Household members W/ your (Don't include yourself)		□ Yes □ No		C3 Yes C3 No	List ALL codes that apply	am≠pm
Total #:		CI Yes CI No		CJ Yes CJ: No	Eist AEE codes that apply	em/pm
Total #:		O Yes		O Yes O No	List ALt. codes that apply Contin	am/pm



CONTINUE for your second travel day. If you have more than 12 places, please record them on a separate piece of paper.

		ease record the N	REACH PLACE: IAME OF THE PLACE y and the NEAREST MAJOR INTI Y and ZIP CODE	What TIME did you ARRIVE? Record exact time
PLACE 7	Next PLACE:	☐ My Home ☐ My Work Provide the name of	☐ My School☐ Bus stop or Train st. the place and as much of the	am/pm
PLACE 8	Next PLACE:	☐ My Home ☐ My Work Provide the name of	☐ My School☐ Bus stop or Train sta the place and as much of the	: am/pm
PLACE 9	Next PLACE:	☐ My Home☐ My Work Provide the name of	☐ My School☐ Bus stop or Train sta the place and as much of the	:_ am / pm
PLACE 10	Next PLACE:	☐ My Home ☐ My Work Provide the name of	☐ My School☐ Bus stop or Train stathe place and as much of the	: am / pm
PLACE 11	Next PLACE:	☐ My Home ☐ My Work Provide the name of	 □ My School □ Bus stop or Train st the place and as much of the 	:: am/pm
PLACE 12	Next PLACE:	☐ My Home ☐ My Work Provide the name of	☐ My School ☐ Bus stop or Train st the place and as much of the	: am/pm

- 6 If you traveled in a VEHICLE owned by your HOUSEHOLD, tell us the Make and Model.
- Did you get out of your vehicle at this place?
- 8 If you rode Transit, record which route number or line you used.
- Record ALL the codes that apply from the LIST 2 CODES (located on the flap of this Log) for "WHAT did you DO there?"
- **10** EXACT TIME you LEAVE each place.

